

We Can Help You by:

- **providing useful resources and information** about effective approaches for people or organizations interested in counteracting discrimination and stigma;

- **making you aware of research** on discrimination and stigma — including research regarding the public's attitudes about, and behaviors toward, people with mental illnesses — that has been published or that is underway;

- **offering information** about available publications, events, and issues of relevance regarding discrimination and stigma;

- **connecting you with guest speakers** who can make presentations on discrimination and stigma in your state;

- **providing a comprehensive bibliography** of literature addressing discrimination and stigma;

- **offering technical assistance and trainings** to help you create your own anti-discrimination/anti-stigma initiatives, or information to help you connect with effective campaigns and programs that already exist in your area.

Elimination of Barriers Initiative Collaboration

The ADS Center will act as a key resource and tool for a companion Center for Mental Health Services (CMHS) program, the Elimination of Barriers Initiative (EBI). The EBI works with States and other stakeholders to reduce the discrimination and stigma associated with mental illnesses. Over a three-year period, the EBI will develop and test models and public education materials — including radio, television, and print public service announcements (PSAs) — in eight pilot States around the country. Upon completion of the evaluation, CMHS will distribute the resulting evidence-based public education practices and materials to States and communities across the nation.

How to Contact Us:

■ By Phone:

The ADS Center's toll-free number is 1-800-540-0320. We are open Monday-Friday (9:00 a.m. to 5:00 p.m. Eastern Time) with bilingual (English/Spanish) staff.

■ On the Web:

www.samhsa.gov/stigma

■ By Mail:

ADS Center
1211 Chestnut Street, 11th Floor
Philadelphia, PA 19107

■ By E-mail:

info@adscenter.org



The ADS Center is a program of the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, and operated by a contract with The Gallup Organization and the Mental Health Association of Southeastern Pennsylvania.

Resource Center to Address Discrimination and Stigma

Associated with Mental Illness (ADS Center)



“Bridging the gap between where we are and where we need to be”

For more information call:
1-800-540-0320
www.samhsa.gov/stigma



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services www.samhsa.gov

Who We Are:

The Resource Center to Address Discrimination and Stigma Associated with Mental Illness (ADS Center) provides practical assistance to individuals, States, and public and private organizations in the design, implementation, and operation of programs and initiatives to reduce discrimination and stigma.

The Need:

“Mental Health: A Report of the Surgeon General” identified stigma as one of the major barriers that discourage adults with mental illnesses, and the families of children and adolescents with serious emotional disorders, from seeking treatment. Among the consequences of discrimination and stigma for adults who have mental illnesses are lowered self-esteem; disrupted family relationships; and increased difficulty in building connections in the community, securing housing, and obtaining

employment. Children who experience discrimination and stigma may be scarred for life.

Our Goal:

The goal of the ADS Center is to enhance mental health consumer independence and community participation by ensuring that people have all the information they need to develop successful efforts to counteract discrimination and stigma.

Remember:

■ *People who have mental illnesses can and do recover and live productive lives.*

Research has documented that individuals who have mental illnesses experience recovery. Recovery can mean being able to hold down a job, go back to school, have a close relationship with family and friends, or however an individual defines it. A common theme is a feeling of responsibility for one's life and a sense of control over one's problems.

■ *People who have mental illnesses have the same needs as everyone else.*

Meaningful work; decent, affordable housing; good health care; sufficient education; positive relationships; and acceptance by family and peers matter to each of us.

■ *People who have mental illnesses make valuable contributions to society.*

Abraham Lincoln and Winston Churchill had depression but led their countries to victory; Nijinsky had manic-depression (bipolar disorder)

but dazzled audiences with his dancing (Jamison, K.R., *Touched with Fire: Manic-Depressive Illness and Artistic Temperament*, New York, NY: The Free Press, Macmillan, 1993). Mathematician John Nash had schizophrenia but won the Nobel Prize. Overcoming discrimination and stigma, getting effective treatment, and being part of a support network enable people with psychiatric disabilities to reclaim their lives and to enjoy meaningful careers.

■ *Discrimination against people who have mental illnesses keeps them from seeking help.*

Mental health is as important as physical health to the overall well-being of individuals and societies. Yet only a small minority of those living with psychiatric disabilities receive treatment. While one in five Americans lives with a mental disorder in any given year, estimates indicate that nearly two-thirds of all people with diagnosable mental disorders do not seek treatment. Fear of disclosure, rejection by friends, and discrimination are a few reasons why people with

mental illnesses don't seek help (*Mental Health: A Report of the Surgeon General*, 1999).

■ *Discrimination against people who have mental illnesses violates their rights and denies them opportunities.*

Despite the Americans with Disabilities Act and other civil rights laws, people with psychiatric disabilities often experience discrimination in the workplace, education, housing, and health care. For example, studies have shown that prejudice against people with mental illnesses has a negative impact on their ability to obtain and maintain good jobs or rent decent, affordable housing (Wahl, O., “Mental health consumers' experience of stigma,” *Schizophrenia Bulletin*, 1999, 25, 467-478).

Eliminating the stigma of mental illness can build a bridge from discrimination to opportunity — for decent, affordable housing; good health care; meaningful employment; sufficient public education; and inclusion in the community.